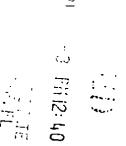
# N40931

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
|   |
|   |
|   |



100361778391

04/01/21--01015--011 \*\*35.00

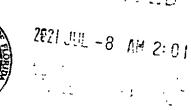


Office Use Only

JUL : ZEZ

(4) S

RECEIVED



### FLORIDA DEPARTMENT OF STATE Division of Corporations

May 28, 2021

BETTY MAYDON 3343 FIVE POINTS RD COTTONDALE, FL 32431

SUBJECT: ABUNDANT FAITH FULL GOSPEL CHURCH, INC.

Ref. Number: N40931

We have received your document for ABUNDANT FAITH FULL GOSPEL CHURCH, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This is a Non-profit corporation the document you sent in is for a Profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux Regulatory Specialist II

Letter Number: 921A00011707

#### **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

| NAME OF CORPORATION: Abundant Faith Full Gospel Churc  |
|--|
| DOCUMENT NUMBER: N40931  |
| The enclosed Articles of Amendment and fee are submitted for filing.   |
| Please return all correspondence concerning this matter to the following:  |
| Betty Maxbon (Name of Contact Person)  |
| Abundant Faith Full Gospel Church (Firm/ Company)  |
| 3343 Five points Rd.   |
| Cottondale, FL 3243/ (City/ State and Zip Code)  |
| mmaylon 23 (a) Vechoo, Com E-mail address: yo be used for future annual report notification)   |
| For further information concerning this matter, please eall:   |
| Betty Maxhon at 850 38/-2265 (Name of Contact Person) (Area Code) (Daytime Telephone Number)   |
| Enclosed is a check for the following amount made payable to the Florida Department of State:  |
| □ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status  Certificate of Status  (Additional copy is enclosed)  □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status  Certified Copy  (Additional Copy is Enclosed) |
| Mailing Address Street Address   |

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### Articles of Amendment

to

Articles of Incorporation

| Abundant Faith Full Gospel Church  |
|--|
| (Name of Corporation as currently filed with the Florida Dept. of State)   |
| <u>N40931</u>  |
| (Document Number of Corporation (if known)   |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation: |
| A. If amending name, enter the new name of the corporation:  |
| The new  |
| name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc."  "Company" or "Co." may not be used in the name.             |
|  |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  |
| (Trincipal office address MOST BE A STREET ADDRESS)  |
| ***************************************  |
|  |
| C. Enter new mailing address, if applicable:   |
| (Mailing address MAY BE A POST OFFICE BOX)   |
|  |
|  |
|  |
|  |
| D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:                |
| Name of New Registered Agent: Lonnie Allen Gilbert   |
| 11/172 Megant Grand 1 200  |
| 4423 Plesant Grove Lage  |
| New Registered Office Address:   |
| Marianna Florida 324 8   |
| (City) (Zip Code)  |
|  |
| New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. |
| , A 11   |
| Touch Men So   |
| Signature of New Registered Agent if changing  |

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| Example: X Change X Remove X Add   | PT         John I           V         Mike J           SV         Sally S | lones  |   |
|------------------------------------|---|--|---|
| Type of Action<br>(Check One)      | <u>Title</u>  | <u>Name</u>  | <u>Addres</u> s   |
| 1) Change<br>Add                   | _D_   | Calvin Tanner  | 476 5mith Rd.   |
| Remove  2) Change Add              | <u></u>   | Charles Speights   | Monticella, FL3234<br>3408, Sprights LN<br>Marrinna EL 32448              |
| Remove 3 ) Remove Add Remove       | +>  | Willie Maybon  | 3343 Five points Ad<br>Cottondale, FL 32431                               |
| 4) Change Add                      | <u>Up</u>   | Mariea Mayson  | 3021 Butter Cup LN<br>Cottondale FL 37431                                 |
| Emove  5) Change Add               | <u>D</u>  | Gregory Glover   | 2328 Jopaz Rd<br>Cottondak, St. 32431                                     |
| Remove 6) Change Add               |   |  |   |
| E. If amending or additional sheet |   | ticles, enter change(s) here:<br>(Be specific)   |   |
| Articlev                           | I Shall<br>n Shall<br>pastor<br>De at<br>tors a,                          | read: The affaire<br>be Managed by the<br>- and all other C<br>the discrection<br>and shall not be-p | s of this<br>Board of<br>hurch Officers<br>of the Board<br>expetual terms |
| UTUTILE                            | •   |  |   |

| Article VII  |   |                                       |  |     |
|--|---|---------------------------------------|--|-----|
| Remove, Cal  | Vin Tanne   | ~ 476 5mi                             | th Bd                                    |     |
|  |   |                                       | aft 32344                                |     |
|  |   | <u> </u>                              | 010 57, 144                              |     |
|  |   |                                       |  |     |
|  | <del>, , , , , , , , , , , , , , , , , , , </del> |                                       |  |     |
|  |   |                                       |  |     |
|  |   | ,                                     |  |     |
|  |   |                                       |  |     |
|  |   |                                       | ,  |     |
|  |   | · · · · · · · · · · · · · · · · · · · | <del>-</del>                             |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
|  |   |                                       |  |     |
| The date of each amendment(s) add  | 3-70  | 21                                    | , if other than                          |     |
| date this document was signed.   | peron:  |                                       | , ii other than                          | tne |
| Effective date if applicable:  |   |                                       |  |     |
| <del></del>  | (no more than 90 days                             | after amendment file date)            |  | _   |
| Note: If the date inserted in this bloc document's effective date on the Dep |   | de statutory filing requirement       | nts, this date will not be listed as the |     |
| Adoption of Amendment(s)   | (CHECK ONE)                                       |                                       |  |     |
| The amendment(s) was/were add was/were sufficient for approval               | opted by the members and th                       | e number of votes cast for th         | e amendment(s)                           |     |

| There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.   |
|--|
| Dated $3 - 29 - 2021$  |
| Signature Charles & Sprights   |
| (By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) |
|  |
| Charles L Speights (Typed or printed name of person signing)   |
|  |
| Chairman of the Board (Title of person signing)  |